

06/24/2003

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.: S-100,630

First Inventor or Application Identifier: Herbert O. Funsten

Title: FOIL ELECTRON MULTIPLIER

Express Mail Label No.: ET461825869US

22264 U.S. PTO
10/671109

APPLICATION ELEMENTS

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
PO Box 1450
Alexandria, VA 22313-1450

1. ☒ * Fee Transmittal Form (e.g. PTO/SB/17)
(submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages: 18]
 - ☒ Descriptive title of the Invention
 - ☐ Cross References to Related Applications
 - ☒ Statement Regarding Fed sponsored R&D
 - ☐ Reference to sequence listing, a table or a computer program listing appendix
 - ☒ Background of the Invention
 - ☒ Brief Description of the Drawings (if filed)
 - ☒ Detailed Description
 - ☒ Claim(s)
 - ☒ Abstract of the Disclosure
4. ☒ Drawings(s) (35 U.S.C. 113) [Total Sheets: 7]
 - ☒ Formal ☐ Informal
5. ☒ Declaration & Power of Attorney [Total Pages:]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 C.F.R. § 63(d)
(for continuation/divisional with Box 16 completed)
 - c. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b).

6. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Copy
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies): or
 - ii. ☐ paper
 - c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

8. ☒ Assignment Papers (cover sheet & documentation)
9. ☐ 37 C.F.R. § 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
10. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)
(should be specifically itemized)
13. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
14. ☐ Nonpublication Request and Certification Under 35 U.S.C. 122(b)(2)(b)(i)
15. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application S.N. S-100,630.

Prior application information: Examiner:

Group/Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

16. CORRESPONDENCE ADDRESS

☐ Customer Number 350681OR ☐ Correspondence Address Below

(Insert Customer No. or Attach Bar Code Label here)

Name: Mark N. Fitzgerald
Address: Los Alamos National Laboratory, LC/IP, MS A187
City: Los Alamos State: New Mexico Zip Code: 87545
Country: United States Telephone: (505) 665-5187 Fax: (505) 665-4424

Name: Mark N. Fitzgerald

Registration No.: 48,300

Signature:

Date: 9/25/03

FEE TRANSMITTAL

For FY 2003

Patent fees are subject to annual revision
(submit an original and a duplicate for fee processing)

Complete if Known

Application Number:	
Filing Date:	
First Named Inventor:	Herbert O. Funsten
Examiner Name:	
Group/Art Unit:	
Attorney Docket No.:	S-100,630

METHOD OF PAYMENT

1. ☒ The commissioner is hereby authorized to charge indicated fees and credit any over payments to:
 Deposit Account Number: **12-2150**
 Deposit Account Name: Los Alamos National Laboratory
- ☒ Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17
- ☒ Applicant claims small entity status. See 37 CFR 1.27

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$750	\$375	Utility filing fee	375
\$750	\$375	Reissue filing fee	
\$160	\$80	Provisional filing fee	

SUBTOTAL (1) \$375

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from Fee Paid Below	Fee Paid
20	1		-20** = 0	X 0	= 0
			-3** = 0	X 0	= 0
					=

** or number previously paid, if greater; For Reissues, see below

Large Entity Fee	Small Entity Fee	Fee Description
\$18	\$9	Claims in excess of 20
\$84	\$42	Independent claims in excess of 3
\$280	\$140	Multiple dependent claim, if not paid.
\$84	\$42	** Reissue independent claims over original patent
\$18	\$9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$0

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$130	\$65	Surcharge – late filing fee or oath	
\$50	\$25	Surcharge – late provisional filing fee or cover sheet	
\$2,520	\$2,520	For filing a request for reexamination	
\$110	\$55	Extension for reply within first month	
\$410	\$205	Extension for reply within second month	
\$930	\$465	Extension for reply within third month	
\$1,450	\$725	Extension for reply within fourth month	
\$1,970	\$985	Extension for reply within fifth month	
\$320	\$160	Notice of Appeal	
\$320	\$160	Filing a brief in support of an appeal	
\$280	\$140	Request for oral hearing	
\$110	\$55	Petition to revive – unavoidable	
\$110	\$55	Terminal Disclaimer	
\$1,300	\$650	Petition to revive – unintentional	
\$130	\$130	Petitions to the Commissioner	
\$50	\$50	Petitions related to provisional applications	
\$180	\$180	Submission of Information Disclosure Statement	
\$750	\$375	Filing a submission after final rejection (37 CFR 1.129 (a))	
\$750	\$375	For each additional invention to be examined (37 CFR 1.129(b))	
\$100	\$100	Certificate of Correction	
\$300	\$300	Publication fee for early, voluntary, or normal publication	
\$750	\$375	Request for Continued Examination (RCE)	

Other fee (specify) _____

SUBTOTAL (3) \$0

Reduced by Basic Filing Fee Paid

SUBTOTAL FROM 1	\$375
SUBTOTAL FROM 2	\$0
SUBTOTAL FROM 3	\$0
TOTAL AMOUNT OF PAYMENT	\$375

SUBMITTED BY

Complete (if applicable)

Printed Name: Mark N. Fitzgerald	Reg. No. 48,300
Signature: 	Date 9/25/03 Telephone (505) 665-5187